# 12 510(k) Summary

This summary of 510(k) safety and effectiveness information is being submitted in accordance with the requirements of Safe Medical Device Act 1990 and 21 CFR § 807.92.

I. General Information

Establishment

Siemens Medical Solutions. Inc.

51 Valley Stream Parkway

Malvern, PA 19355

**Registration Number** 

2240869

Manufacturer

Siemens AG. Bereich Med

Henkestrasse 127

D-91052 Erlangen. Germany

**Registration Number** 

8010024

**Contact Person** 

Ms. Ana Ladino

Technical Specialist. Regulatory Submissions

51 Valley Stream Parkway

Malvern. PA 19355 Phone: (610)448-1785 Fax: (610) 448-1787

**Device Name** 

Trade Name:

MAGNETOM Trio a Tim System

Classification Name: Magnetic Resonance Diagnostic Device

CFR Code:

21 CFR § 892.1000

Classification:

Class II

## **Performance Standards**

None established under Section 514 the Food. Drug. and Cosmetic Act.

### II. Safety and Effectiveness Information Supporting Substantial Equivalence.

#### Indications for Use

The MAGNETOM Trio a Tim System is intended for use as a magnetic resonance diagnostic device (MRDD) that produces transverse, sagittal, coronal and oblique cross sectional images, spectroscopic images and/or spectra, and that displays the internal structure and/or function of the head, body, or extremities. These images and/or spectra, when interpreted by a trained physician yield information that may assist in diagnosis.

The MAGNETOM Trio a Tim System may also be used for imaging during interventional procedures performed with MR compatible devices such as in room display and MR safe biopsy needles.

#### **Device Description**

The MAGNETOM Trio a Tim System is a 3.0 T closed superconducting magnet whole body designed scanner. It consists of the same types of hardware that are currently available with the MAGNETOM Trio and Avanto systems.

# Substantial Equivalence

The system is substantially equivalent to the following cleared medical devices:

Predicate Device Name	FDA Clearance Number	FDA Clearance Date
Siemens MAGNETOM 1.5 T Avanto	K032428	October 16, 2003
Siemens MAGNETOM 3.0 T Trio	K013586	December 28, 2001

#### General Safety and Effectiveness Concerns:

Operation of the MAGNETOM Trio a Tim System is substantially equivalent to the commercially available MAGNETOM 3.0 T Trio System and 1.5 T Avanto System.

The MAGNETOM Trio a Tim System will conform to the FDA recognized NEMA Standards for the measurement of performance and safety parameters and the international IEC standard for safety issues with Magnetic Resonance Imaging Devices. This will assure that the performance of this device can be considered safe and effective with respect to the currently available MAGNETOM Trio and Avanto systems.



FEB 2 8 2005

Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Ms. Ana Ladino Technical Specialist Siemens Medical Solutions, Inc. USA 51 Valley Stream Parkway MALVERN PA 19355 Re: K050200

Trade/Device Name: MAGNETOM Trio a Tim System

Regulation Number: 21 CFR 892.1000 Regulation Name: Magnetic resonance diagnostic device

Regulatory Class: II Product Code: 90 LNH Dated: January 25, 2005 Received: January 28, 2005

#### Dear Ms. Ladino:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the <u>Code of Federal Regulations</u>, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at one of the following numbers, based on the regulation number at the top of this letter:

21 CFR 876.xxxx	(Gastroenterology/Renal/Urology)	240-276-0115
21 CFR 876.XXXX	(Obstetrics/Gynecology)	240-276-0115
21 CFR 892.xxxx	(Radiology)	240-276-0120
<del>-</del> -	(1444.01-65)	240-276-0100
Other		

Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address <a href="http://www.fda.gov/cdrh/industry/support/index.html">http://www.fda.gov/cdrh/industry/support/index.html</a>.

Sincerely yours,

Manay C. Brogdon
Nancy C. Brogdon

Director, Division of Reproductive, Abdominal, and Radiological Devices

Office of Device Evaluation

Center for Devices and Radiological Health

Enclosure

# 3 Indications for Use Statement

W. C. 2. 12
510(k) Number (if known) <u>Ko 50200</u>
Device Name: MAGNETOM Trio a Tim System
Indications for Use:
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(please do not write below this line- continue on another page if needed)
Concurrence of CDRH, Office of Device Evaluation
Prescription Use Over-The-Counter Use Over-The-Counter Use
(Division Sign-Off)  Division of Reproductive Abdominal

and Radiological Devices

510(k) Number \_